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POLICY

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1. Introduction

The purpose of this Policy is to ensure minimum standards for continuing genetic counselling practice, and sets minimum practice requirements for practitioners to maintain their skills and competency.

2. NASRHP Definition of 'practice'

For the purposes of regulation, the National Alliance of Self Regulating Health Professions (NASRHP) definition of practice has been adopted, as follows¹: "Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. Practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct nonclinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession."

3. Recency of Practice

Recency of Practice refers to the period of time over which an individual has used their professional knowledge and skills, and the extent to which they have maintained their contemporary practice and competencies within a profession.

3.1. Practice hours

Any genetic counsellor on the HGSA-Register must be able to demonstrate at least 200 hours of practice per year or 600 hours of practice in a relevant role (see 2. NASRHP Definition of 'practice') in the previous three-year period in order to be considered as practising and to maintain their status on the [HGSA Register of Genetic Counsellors](#). This is not restricted to clinical practice, and includes practice in other areas (see 2. NASRHP Definition of 'practice'). To better understand the variety of scopes of practice of a genetic counsellor see the [Scope of Practice policy](#).

For graduates of an HGSA Accredited Master of Genetic Counselling course, the practical placement and clinical practice-related activities achieved during their Master of Genetic Counselling program are sufficient to apply for active status within two years of graduation. Refer to the [Course Accreditation Policy for Masters of Genetic Counselling](#) for details of placement and clinical practice activity hours.

HGSA-Registered genetic counsellors undertaking certification or on a resumption of practice in a clinical role must be able to demonstrate that their role includes direct clinical contact. For the purpose of this Policy, clinical contact is defined as per the Definition of Clinical Contact in the HGSA [Clinical Certification Policy for Genetic Counsellors](#).

3.2. Supervision in practice

Ongoing supervision is a foundation of reflective practice and is a requirement of genetic counselling practice. Actively practicing genetic counsellors in any area of practice will be required to provide evidence of appropriate supervision as defined in the HGSA [Supervision Policy for Genetic Counsellors](#).

¹ National Alliance of Self-Regulating Health Professions. (May 2024). *Membership Standards Users Guide*.

3.3. Evidence of practice

3.3.1. Clinically practicing genetic counsellors

Clinically practicing genetic counsellors must maintain and be able to provide:

- Written evidence of employment, such as a record of employment or employment contract.
- Evidence of supervision, as outlined in the HGSA [Supervision Policy for Genetic Counsellors](#), such as a Supervision Contract. Supervision is a requirement for all practising genetic counsellors.

A Referee's report can be provided as evidence, including hours and type of work, hours of attendance at supervision, and evidence that the candidate practises within the HGSA [Code of Conduct](#) and [Scope of Practice for Genetic Counsellors](#) at the level of a competent practitioner (HGSA [Professional Standards for Genetic Counsellors](#)), can be given by the following referees:

- The most appropriate Referee's report is from a line manager or head of department who has at least two years post FHGSA (Genetic Counselling) certification and whose registration is current.
- **Alternatively, if the line manager or head of department does not hold current FHGSA certification, two referee's reports should be provided, one from the line manager or head of department AND an additional report from an appropriate senior genetic counsellor colleague with at least two years post FHGSA certification whose registration is current. To avoid conflict of interest the referee should not in any way report to or be managed by the applicant and the report should state the nature of their professional relationship.**
- **In the absence of an appropriate referee with current FHGSA genetic counselling certification, the [Professional Practice Committee](#) may consider at least two referee's reports, at least one from a genetic counselling supervisor meeting the supervisor requirements as per the HGSA [Supervision Policy for Genetic Counsellors](#). A current CV will be required for any referee who is not FHGSA in order to assess their suitability.**

3.3.2. Genetic counsellors in other Areas of Practice

Individuals working in other areas of genetic counselling practice must maintain and be able to provide:

- Written evidence of employment such as a record of employment or employment contract.
 - Alternatively, if written evidence is not available, a Referee's report (below) can include details of hours worked.
- A formal job description from their employer.
- Evidence of supervision, as outlined in the HGSA [Supervision Policy for Genetic Counsellors](#). Supervision is a requirement for all practising genetic counsellors.
- The Committee may require, at their discretion:
 - A statement highlighting how practice in their current employment meets the [Scope of Practice](#) and [Professional Standards for Genetic Counsellors](#) on a regular basis.
 - A reference from a senior genetic counsellor who is familiar with the practitioner's work and area of practice, who has at least two years post FHGSA (Genetic Counselling) certification and whose registration is current.
 - **In the absence of an appropriate referee with current genetic counselling certification, the [Professional Practice Committee](#) may consider other appropriately qualified referees from the practitioner's area of practice. A current CV will be required for any referee who is not FHGSA in order to assess their suitability.**

3.4. Practice Audit

Any genetic counsellor listed on the [HGSA-Register of Genetic Counsellors](#) may be subject to audit. Audits will be conducted by the [Professional Practice Committee](#) on an annual basis to ensure compliance with the Policy and address any situations where practitioners cannot demonstrate the required minimum hours to be considered practising. The Professional Practice Committee will annually audit:

- A minimum of five per cent of all genetic counsellors on register. This will include:
 - All genetic counsellors who have submitted cases towards their FHGSA certification
 - All genetic counsellors with FHGSA who are returning to practice as part of their Resumption of Practice Plan
 - Genetic counsellors who have failed an audit in the previous year
 - Any other sub-groups identified as requiring audit

On request, practitioners must be able to provide evidence to validate claims of 'practice' (see 6.3 Evidence of Practice). Practitioners who do not meet the requirements and/or fail to respond to the Audit will have their status on the Register changed to LAPSED.

3.5. Genetic counsellors not meeting recency of practice requirements

Any genetic counsellor who has not met the minimum recency of practice requirement will lapse on the Register. The genetic counsellor will be notified by email. The genetic counsellor must provide sufficient evidence that they meet the recency of practice requirement within 3 months (by 1 July of the membership year), or their registration will remain as LAPSED for the remainder of the membership year.

- **Certification submissions will not be accepted from genetic counsellors whose registration is LAPSED.**
- **A Registered Fellow - FHGSA genetic counsellor is unable to act as a supervisor while their status is LAPSED.**
- If a genetic counsellor has three years of a LAPSED status, they will become EXPIRED on the Register.
- If a genetic counsellor is LAPSED for any period of time during three consecutive audit years, they are considered non-compliant and will become EXPIRED on the Register.

Where a registered practitioner cannot demonstrate recency of practice in line with the Policy, they must meet Resumption of Practice requirements to update their knowledge and skills and demonstrate their competence to practise in order to re-register. See the Resumption of Practice Policy, which provides a supportive pathway for genetic counsellors to return to active practice after a period of time out of the profession.

4. Exclusions

According to NASRHP², continuing professional development (CPD) does not constitute practice, and it is addressed separately in the HGSA [Continuing Professional Development \(CPD\) for Genetic Counsellors Policy](#).

² National Alliance of Self-Regulating Health Professions. (May 2024). *Membership Standards Users Guide*.

5. Version History

May 2026	Terminology updated to align with that being used in accordance with NASRHP 2026 Standards
April 2025	Section 9: Resumption of practice moved to a separate policy to align with NASRHP Standards (2025GC11 Recency of Practice). NASRHP definition of Practice updated. Website links and references updated.
April 2023	Updated to clarify requirements for evidence at application, account for ACTIVE status, and that PROVISIONAL status is not granted until Submission 1 (i.e. candidates remain "ACTIVE" until they make Sub 1 after 12 months/200 clinical hours.

6. Figure: Regulation Flowchart

Visit <https://hgsa.org.au/Web/Consumer-resources/Genetic-Counselling.aspx>